

FOLD & TEAR OFF STUB

SOCIAL SECURITY ADMINISTRATION
WESTERN PROGRAM SERVICE CENTER
PO BOX 2000
RICHMOND CA 94802-1791

M07
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PRESORTED
FIRST-CLASS MAIL
POSTAGE AND FEES PAID
SOCIAL SECURITY
ADMINISTRATION
PERMIT NO. G-11

FOLD & TEAR OFF STUB

OFFICIAL BUSINESS
PENALTY FOR PRIVATE USE, \$300



Form SSA-1099-SM (1-2008)

WHY YOU ARE RECEIVING THIS CORRECTED NOTICE

**HERE IS A COPY OF THE NOTICE YOU SHOULD HAVE RECEIVED.
PLEASE DESTROY THE EARLIER ONE. WE APOLOGIZE FOR ANY
INCONVENIENCE THIS ERROR MAY HAVE CAUSED.**

IMPORTANT: TAX INFORMATION ENCLOSED

KEEP THIS FORM FOR PROOF OF SOCIAL SECURITY BENEFITS

NEED TO CONTACT SOCIAL SECURITY? CALL 1-800-772-1213!

OR

VISIT OUR WEBSITE WWW.SOCIALSECURITY.GOV

Printed on recycled paper

GPO : U.S. GOVERNMENT PRINTING OFFICE : 2008 334 241 00005

Urgent Corrected Mailing

LIFT TO OPEN



CORRECTED TAX INFORMATION
FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT

2007

• PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.
• SEE THE REVERSE FOR MORE INFORMATION.

| | | |
|---------------------------------------|---------------------------------------|---|
| Box 1. Name | | Box 2. Beneficiary's Social Security Number |
| Box 3. Benefits Paid in 2007 | Box 4. Benefits Repaid to SSA in 2007 | Box 5. Net Benefits for 2007 (Box 3 minus Box 4) |
| DESCRIPTION OF AMOUNT IN BOX 3 | | DESCRIPTION OF AMOUNT IN BOX 4 |
| | | Box 6. Voluntary Federal Income Tax Withheld |
| | | Box 7. Address |
| | | Box 8. Claim Number (Use this number if you need to contact SSA.) |